HAWAII STATE ETHICS COMMISSION DISCLOSURE OF FINANCIAL INTERESTS (LONG FORM)

NAME (Last, First, Middle)

COKUBUN, RUSSEN SADAMI

TERM OF OFFICE (Begin/End):

FOR EACH ITEM, EXCEPT ITEM 9, DISCLOSE INTERESTS OF FILER, SPOUSE, AND DEPENDENT CHILDREN. USE THE ABBREVIATIONS: "F" for filer, "SP" for spouse, "DC" for dependent children, and "JT" for joint interests of the spouse and filer.

ITEM 1: INCOME FOR SERVICES RENDERED FOR PRECEDING CALENDAR YEAR

List the source (the term "source" also includes any state or other government agencies) and amount of all income of \$1,000 or more received during the preceding calendar year, for services rendered, and the nature of the services rendered.

F,SP,DC,JT	NAME AND ADDRESS OF SOURCE OF INCOME	AMOUNT	SERVICES RENDERED
F	STATE OF HAWAII	D	LEGISLATOR
SP	DEPT. OF EDUCATION STATE OF HAWAII	E	ADMINISTRATOR
F	PULAMA IA KONA HERITAGE PRESERVATION COUNCIL PO BOX 398 CAPT. COOK, HAWAH 96704	B	MANAGEMENT CONSULTANT

]Check here if entry is None

[]Check here if additional sheets are attached

ITEM 2: OWNERSHIP OR BENEFICIAL INTERESTS IN BUSINESSES

List the amount and identity of every ownership or beneficial interest held during the disclosure period in any business incorporated, regulated, or licensed to carry on business in the State if the interest has a value of \$5,000 or more or is equal to 10% or more of the ownership of the business.

ownership of the business.					
F,SP, DC,JT	BUSINESS NAME AND ADDRESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE OR NO. OF SHARES	
F	KOKUBUN FARM PO BOX 357 VOLCANO, HAWALI 96788	AGRICULTURE	owner	D	
F	RUSSEU S. KOKUBAN PO BOX 357 VOLCANO, HAWANGET	MANAGEMENT SERVICES	PROPUETOR	B	
[]Check here if entry is None [V]Check here if additional sheets are attached					

ITEM 3: TRANSFER OF OWNERSHIP OR BENEFICIAL INTERESTS IN BUSINESSES

List any ownership or beneficial interests in businesses transferred during the disclosure period and the date of transfer.

OWNERSHIP OR BENEFICIAL INTEREST TRANSFERRED DURING THIS DISCLOSURE

DC,JT **PERIOD** TRANSFER [V]Check here if entry is None []Check here if additional sheets are attached ITEM 4: CREDITORS List the name and address of each creditor to whom the value of \$3,000 or more was owed during the disclosure period and the original amount and amount outstanding (excluding debts arising out of retail transactions or the purchase of consumer goods). F.SP. **AMOUNT** NAME OF CREDITOR AND ADDRESS **ORIGINAL AMOUNT** DC,JT **OWED OUTSTANDING** BANK OF HAWAII PO BOX 380034 HONOLUM, HAWAM 96838-0034 JTI []Check here if additional sheets are attached]Check here if entry is None ITEM 5: OFFICERSHIPS, DIRECTORSHIPS, TRUSTEESHIPS List every officership, directorship, trusteeship, or other fiduciary relationship held during the disclosure period in any business or organization, the term of office, and the annual compensation. F.SP. NAME AND ADDRESS OF BUSINESS TERM OF OFFICE ANNUAL TITLE HELD COMPENSATION DC,JT []Check here if additional sheets are attached [¿ Check here if entry is None

F.SP.

DATE OF

ITEM 6: INTERESTS IN REAL PROPERTY HELD IN THE STATE

List interests in real property in the State, held during the disclosure period, if the interest has a value of \$10,000 or more.						
F,SP, DC,JT	STREET ADDRESS	TAX MAP KEY NUMBER	VALUE			
JT	19-4346 ALANUI-IIWI RD NOLCANO, HAWAII 9675!	5 3-1-9-011:0	061 G			
[]Chec	k here if entry is None		dditional sheets are attached			
List interes	ITEM 7: INTERESTS IN RE sts in real property in the State, acquired during the disclo		lue of \$10.000 or more.			
F,SP, DC,JT	TAX MAP KEY NUMBER & STREET ADDRESS	AMOUNT & NATURE OF CONSIDERATION PAID	NAME OF PERSON RECEIVING THE CONSIDERATION			
[]/Chec	ck here if entry is None	[]Check here if a	dditional sheets are attached			
	ITEM 8: INTERESTS IN REAL	PROPERTY TRANSFERRED				
F,SP, DC,JT		AMOUNT & NATURE OF CONSIDERATION RECEIVED	value of \$10,000 or more. NAME OF PERSON FURNISHING THE CONSIDERATION			
[L]Che	[]Check here if entry is None []Check here if additional sheets are attached					

ITEM 9: CLIENTS PERSONALLY REPRESENTED BEFORE STATE AGENCIES

List the names of clients personally represented by you before state agencies, except in ministerial matters, for a fee or compensation during the disclosure period, excluding clients represented before courts.

NAME OF CLIENT	NAME OF STATE AGENCY
•	
[V]Check here if entry is None	[]Check here if additional sheets are attached

ITEM 10: CREDITOR INTERESTS IN INSOLVENT BUSINESSES

List the amount and identity of every creditor interest in insolvent businesses, held during the disclosure period, if the interest has a value of \$5,000 or more.

F,SP,DC,JT	NAME AND ADDRESS OF BUSINESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE
			.04 W	RE
			MAY 27 P4:18 TE OF HARAII THICS COMMISSION	RECEIYED

[L]Check here if entry is None

[]Check here if additional sheets are attached

CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement to the best of my knowledge and belief. If I have a spouse and/or dependent children, I also hereby certify that I have included their interests on this form to the best of my knowledge and belief. I understand that it is a violation of State law, chapter 84, HRS, if information is not disclosed as required by chapter 84, HRS. I further understand that there are statutory penalties for noncompliance.

SIGNATURE

126/04 DATE

Addendum To DISCLOSURE OF FINANCIAL INTERESTS (LONG FORM D-201) For Russell Sadami Kokubun May 26, 2004

ITEM 2: OWNERSHIP OR BENEFICIAL INTERESTS IN BUSINESSES

JT Abbott Labs, Inc.

- Nature of business: Medical supplies, pharmaceuticals
- Interest: Common Stock
- Value: C

JT Merck & Co. Inc

- Nature of business: Medical supplies, pharmaceuticals
- Interest: Common Stock
- Value: C

SP Countrywide Financial Corp.

- Nature of business: Mortgage lending
- Interest: Common Stock
- Value: D

SP Weatherford International Ltd.

- Nature of Business: Petroleum production
- Interest: Common Stock
- Value: B